

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO.

107 28626

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2						
3						
4						
5						
6						
7	1					
8		1				
9		1				
10		2				
11		2				
12						
13						
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21						
22						
23						
24						
25		2				
26		2				
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43						
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45						
46						
47						
48						
49						
50						
TOTAL IND.	2					
TOTAL DEP.	12					
TOTAL CLAIMS	15					

	IND	DEP	IND	DEP	IND	DEP
51						
52						
53						
54						
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						